



Indiana Household Employment Taxes

Attachment Sequence No. **12**

➤ Attach to Form IT-40, Form IT-40PNR or Form IT-40P < 20

20 year

This schedule should be filed by an individual who:

- withholds state and county (if applicable) income tax on household employees, AND
- chooses to pay those withholding taxes with the filing of his/her individual income tax return.

Name of employer (as shown on individual income tax return)		Social Security Num	Social Security Number	
		Federal Employer Ide	entification Number	
Did you file federal	Schedule H for the tax year shown above?			
	uestion B. Do not file this schedule.			
B Did you withhold st	ate and/or county income tax for any house	nold employee?		
	ete Part II on the back of this schedule. Do not file this schedule.			
Make sure you atta	ch the state copy of your employee's W-2 f	orms.		
Con	nplete Part II first. Carry those to	als to the Part I Sumr	mary below.	
Part I Sumn	nary of Household Employmen	Taxes		
Enter the total	State Tax withheld from Part II, line 2		1	
2. Enter the total 0	County Tax withheld from Part II, line 3		2	
	2. Enter the total here		3	
• Form	int on your Indiana individual income tax re n IT-40 line 18, n IT-40PNR line 15.	turn on the following lines:		
	rry, I declare that I have examined this sched nowledge and belief it is true, correct and c		g statements and W-2 forms	

Part II State and County Tax Withholding

Enter below the employee's name and social security number as it appears on their W-2 form. Attach additional pages if withholding for more than three household employees.

Line 1 - Enter the amount on which you are withholding federal income tax (also enter on W-2 boxes 16 and 18.)

Line 2 - Enter the amount of Indiana state tax withheld (also enter on W-2 box 17. Also, enter "IN" on W-2 box 15.)

Line 3 - Enter the amount of county tax withheld (also enter on W-2 box 19.)

Line 4 - Enter the 2-digit county code from Indiana Departmental Notice #1 for which the line 3 county tax was withheld.

Summary -

- ♦ Add all line 2 amounts and enter on Part I, line 1.
- ◆ Add all line 3 amounts and enter on Part I, line 2.

Note: Get Form WH-4 and Departmental Notice #1 for detailed information on how to calculate state and county withholding amounts and to get the county code numbers. Contact the Department at: 317-232-2240 for this information; our fax-on-demand system at 317-233-2329; or access our web site on the Internet at: www.in.gov/dor/

Employee Name (First, M.I., Last)	Social Security Number
Income1.	
State Income Tax Withheld2.	
County Income Tax Withheld3.	
County Code Number4.	
Employee Name (First, M.I., Last)	Social Security Number
Employee Name (First, W.I., Last)	Social Security Number
Income 1.	
State Income Tax Withheld	
State income rax withineru	
County Income Tax Withheld	
County Code Number4.	
Employee Name (First, M.I., Last)	Social Security Number
Income1.	
State Income Tax Withheld	
County Income Tax Withheld	
County Code Number4.	